108000109626

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(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2019

LIANA GARCIA 1359 NORMANDY DR MIAMI BEACH, FL 33141

SUBJECT: ALEGRIA ART PROJECTS, LLC

Ref. Number: L08000109626

We have received your document for ALEGRIA ART PROJECTS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Corporate Records Supervisor

Letter Number: 919A0000272 $\widehat{\widehat{\mathfrak{Z}}}$

1 : 3

COVER LETTER

TO: Registration Division of C	Section orporations			
SUBJECT:A	EARIA ART P	POJECTS LLL nited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corres	pondence concerning this matter	to the following:		
	LIA	Name of Person Firm/Company		
	- · · · · ·	NorMandy dR. Address MACH 133141 City/State and Zip Code	VALLAHASS	2019 HAR
	Property of E-mail address:	A C y al 20 . com to be used for future annual report notif	fication)	÷ ₩ []
For further information	concerning this matter, please c	all:	<u> </u>	29
LVANA O	ARUA of Person	at (366) 9243 Area Code Daytime	e Telephone Number	
Enclosed is a check for	the following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
MAI	LING ADDRESS:	STREET/COURI	ER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clitton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Megry ART P	ty Company as jt now appears on our records.) a Limited Liability Company)
(A Florida	a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number	· · · · · · · · · · · · · · · · · · ·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on our records, enter the name of the new ress here:
Name of New Registered Agent:	SSS - 1
New Registered Office Address:	
	Enter Florida street address 977
	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Ma $AMBR = Au$	nager thorized Member		
<u>Title</u>	Name	Address	Type of Action
Marm	LUD GARlOS GROCCO	1369 normandy dr.	
		mrami heart, PL 33141	Remove
			Change
HARM	CLARHA MUTIS	1359 normandy dr.	> ✓\dd
		mani beach, Pl, 33141	□ Remove
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in effective date is listed, the date mi ote: If the date inserted in this b	ist be specific ar	nd cannot be pri						
cument's effective date on the I	Department of	State's record	ls.					
record specifies a delaye	d effective	date but r	ot an effect	ive time at 1	2:01 a.m. d	on the	e earl	ier
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Filing Fee: \$25.00